

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 66

## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> Chris Dodd For President Inc		<b>2. IDENTIFICATION NUMBER</b> C00431379	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported PO Box 270701			
<b>CITY, STATE, and ZIP CODE</b> West Hartford CT 06127		<b>3. IS THIS REPORT FOR :</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20  
☐ March 20  
☐ April 20  
☐ May 20

☐ June 20  
☐ July 20  
☐ August 20  
☐ September 20

☒ October 20  
☐ November 20  
☐ December 20  
☐ January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ Thirtieth day report following the General Election on \_\_\_\_\_  
 on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD	FROM 09/01/2008	THROUGH 09/30/2008																
<b>SUMMARY</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....</td> <td style="width: 30%; text-align: right;">887055.96</td> </tr> <tr> <td>7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....</td> <td style="text-align: right;">-116714.07</td> </tr> <tr> <td>8. SUBTOTAL (Lines 6 and 7) .....</td> <td style="text-align: right;">770341.89</td> </tr> <tr> <td>9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....</td> <td style="text-align: right;">463292.63</td> </tr> <tr> <td>10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....</td> <td style="text-align: right;">307049.26</td> </tr> <tr> <td>11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....</td> <td style="text-align: right;">142390.52</td> </tr> <tr> <td>13. EXPENDITURES SUBJECT TO LIMITATION .....</td> <td style="text-align: right;">15192990.32</td> </tr> </table>		6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	887055.96	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	-116714.07	8. SUBTOTAL (Lines 6 and 7) .....	770341.89	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	463292.63	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	307049.26	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0.00	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	142390.52	13. EXPENDITURES SUBJECT TO LIMITATION .....	15192990.32
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<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....</td> <td style="width: 30%; text-align: right;">9482744.95</td> </tr> <tr> <td>15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....</td> <td style="text-align: right;">15193230.32</td> </tr> </table>		14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	9482744.95	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	15193230.32												
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**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>Kathryn Damato</b>	Date 01/31/2011
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  
 All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**Chris Dodd For President Inc**

Report Covering the Period

From: 09/01/2008

To: 09/30/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	1961741.71
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	150.00	10078046.95
(b) Political Party Committees	.....	0.00	100.00
(c) Other Political Committees	.....	0.00	755698.30
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		150.00	10833845.25
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	4739005.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	3831.14	120853.49
(b) Fundraising	.....	0.00	240.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		3831.14	121093.49
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	-120695.21	-234441.07
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	-116714.07	18724055.63
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	18182.63	15314083.81
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	440110.00	440110.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	1302811.25
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	1302811.25
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	1178842.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	5000.00	172258.30
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	5000.00	1351100.30
29. OTHER DISBURSEMENTS	.....	0.00	6000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	463292.63	18414105.36
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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**1. NAME OF COMMITTEE (in full)**

Chris Dodd For President Inc

**ADDRESS (number and street)**

PO Box 270701

**CITY, STATE, and ZIP CODE**

West Hartford

CT

06127

**2. IDENTIFICATION NUMBER**

C00431379

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	694906.41
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2510621.08	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>3237582.71</b>

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 66

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Elizabeth Ainslie

Mailing Address

300 Crescent Court

18th Floor

City

Dallas

State

TX

Zip Code

75201-1836

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation

Interior Designer

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A24B478D258C742BB8BB

B.

Full Name (Last, First, Middle Initial)

Lee Ainslie

Mailing Address

300 Crescent Court

18th Floor

City

Dallas

State

TX

Zip Code

75201-1876

FEC ID number of contributing  
federal political committee.

Name of Employer  
Maverick Capital

Occupation

Managing Partner

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A56EA761F828D4952A40

C.

Full Name (Last, First, Middle Initial)

Mr. Peter B. Carey

Mailing Address

11 S Lasalle St.

Suite 1600

City

Chicago

State

IL

Zip Code

60603-1215

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation

Attorney

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-1000.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A76A16332AC764196BD7

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. David T Chase

Mailing Address

225 Asylum Street

29th Floor

City

Hartford

State

CT

Zip Code

06103-1534

FEC ID number of contributing  
federal political committee.Name of Employer  
Chase Enterprises

Occupation

Businessman

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-200.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A7D10E3F38B9E4CF1B59

B.

Full Name (Last, First, Middle Initial)

Craig Cogut

Mailing Address

99 River Road

City

Cos Cob

State

CT

Zip Code

06807-2514

FEC ID number of contributing  
federal political committee.Name of Employer  
Pegasus Investors

Occupation

PE Investor

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AED78CB1BE0EB4E589F6

C.

Full Name (Last, First, Middle Initial)

Deborah Cogut

Mailing Address

99 River Road

City

Cos Cob

State

CT

Zip Code

06807-2514

FEC ID number of contributing  
federal political committee.Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A275964C4ABFD436E8C8

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Sen. Christopher J Dodd

Mailing Address

C/O Chris Dodd for President

P.O. Box 51882

City

Washington

State

DC

Zip Code

20091-1882

FEC ID number of contributing  
federal political committee.

Name of Employer

U.S. Federal Government

Occupation

Senator

Receipt For:

2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A7790E4D6594646F39C3

B.

Full Name (Last, First, Middle Initial)

Mrs. Jackie Clegg Dodd

Mailing Address

C/O Chris Dodd for President

P.O. Box 51882

City

Washington

State

DC

Zip Code

20091-1882

FEC ID number of contributing  
federal political committee.

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A3033E6B82F204256B25

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Douglas

Mailing Address

100 Universal City Plaza

Building 1320-3A

City

Universal City

State

CA

Zip Code

91608-1002

FEC ID number of contributing  
federal political committee.

Name of Employer

Self Employed

Occupation

Actor

Receipt For:

2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A3F394E1F95DA458790F

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Edward R Downe, Jr.

Mailing Address

1133 Park Avenue

City

New York

State

NY

Zip Code

10128-1246

FEC ID number of contributing  
federal political committee.Name of Employer  
Self Employed

Occupation

Investor

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A9D1A47FD4AB947B1918

B.

Full Name (Last, First, Middle Initial)

Mrs. Eva Dubin

Mailing Address

C/o Highbridge Capital Management 9 West 5th Street

City

New York

State

NY

Zip Code

10003-4306

FEC ID number of contributing  
federal political committee.Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-200.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AECDF987981124ADABD7

C.

Full Name (Last, First, Middle Initial)

Anne Finucane

Mailing Address

20 Trapelo Road

City

Lincoln

State

MA

Zip Code

01773-2004

FEC ID number of contributing  
federal political committee.Name of Employer  
Bank of America

Occupation

Executive

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AE8130C2F3C26491FB6C

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 66

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. John G. Gaine

Mailing Address

2025 M Street NW

Suite 800

City

Washington

State

DC

Zip Code

20036-2422

FEC ID number of contributing  
federal political committee.

Name of Employer  
Managed Funds Association

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A803A8A42DB4449BE8FD

B.

Full Name (Last, First, Middle Initial)

Michael F. Goss

Mailing Address

3 Compo Parkway

City

Westport

State

CT

Zip Code

06880-6507

FEC ID number of contributing  
federal political committee.

Name of Employer  
Bain Capital

Occupation  
Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AF36DBAB9070342829E6

C.

Full Name (Last, First, Middle Initial)

Ms. Beverly A Halpin

Mailing Address

PO Box 338

City

Moose

State

WY

Zip Code

83012-0338

FEC ID number of contributing  
federal political committee.

Name of Employer  
Lost Creek Ranch

Occupation  
Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A59F01991D5504BA58CC

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Jack D. Hidary

Mailing Address

303 S. Broadway

Suite 105

City

Tarrytown

State

NY

Zip Code

10591-5410

FEC ID number of contributing  
federal political committee.Name of Employer  
Self Employed

Occupation

Investor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A005250D9767742BBBAF

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Hidary

Mailing Address

1842 E 3rd St

City

Brooklyn

State

NY

Zip Code

11223-1937

FEC ID number of contributing  
federal political committee.Name of Employer  
Self Employed

Occupation

Sales Management

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AD4627744C0AB45E5AA8

C.

Full Name (Last, First, Middle Initial)

Charles Kaman

Mailing Address

43 Prattling Pond Road

City

Farmington

State

CT

Zip Code

06032-1803

FEC ID number of contributing  
federal political committee.Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A452EA05ECCC7481F806

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Roberta Kaman

Mailing Address

43 Prattling Pond Road

City

Farmington

State

CT

Zip Code

06032-1803

FEC ID number of contributing  
federal political committee.Name of Employer  
Fidelco Guide Dog Foundat-  
ionOccupation  
Chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A33538326C4AA481B873

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas L. Kempner, Jr.

Mailing Address

123 East 73rd Street

City

New York

State

NY

Zip Code

10021-3502

FEC ID number of contributing  
federal political committee.Name of Employer  
Davidson Kempner Capital  
ManagementOccupation  
Investment Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A3B6272A046934FDE98C

C.

Full Name (Last, First, Middle Initial)

Mrs. Elizabeth H Lowe

Mailing Address

709 Latimer Road

City

Santa Monica

State

CA

Zip Code

90402-1015

FEC ID number of contributing  
federal political committee.Name of Employer  
N/AOccupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A399B7AE41EF1488D8A4

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 66

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Brian T. Moynihan Mailing Address 100 Federal Street City State Zip Code Boston MA 02110-1812 FEC ID number of contributing federal political committee. Name of Employer Bank of America Occupation Executive Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8 Amount of Each Receipt this Period -2000.00 Redesignation to FOCD <b>[MEMO ITEM]</b> Transaction ID: A44AADF89028947A78EC
<b>B.</b> Full Name (Last, First, Middle Initial) Madalyn Paige Nassetta Mailing Address 2904 North Dinwiddie St City State Zip Code Arlington VA 22207-2751 FEC ID number of contributing federal political committee. Name of Employer N/A Occupation Homemaker Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8 Amount of Each Receipt this Period -2300.00 Redesignation to FOCD <b>[MEMO ITEM]</b> Transaction ID: A04BB01CBF532494F89D
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Peter A Nussbaum Mailing Address 29 Dogwood Lane City State Zip Code Westport CT 06880-5022 FEC ID number of contributing federal political committee. Name of Employer SAC Capital Occupation Attorney Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8 Amount of Each Receipt this Period -2300.00 Redesignation to FOCD <b>[MEMO ITEM]</b> Transaction ID: A1CB68ACE6FFF43FBA3F

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph D. O'Neill

Mailing Address

6448 Brookes Lane

City

Bethesda

State

MD

Zip Code

20816-2505

FEC ID number of contributing  
federal political committee.Name of Employer  
Public Strategies Washing-  
ton

Occupation

President &amp; CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A889E187CD45D4C99815

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey J. Peck

Mailing Address

5900 Cromwell Dr

City

Bethesda

State

MD

Zip Code

20816-3406

FEC ID number of contributing  
federal political committee.Name of Employer  
Johnson Madigan & Peck

Occupation

Lobbyist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A87C2291A5311456CB1F

C.

Full Name (Last, First, Middle Initial)

Mr. Kenneth Reels

Mailing Address

P.O. Box 3380

City

Mashantucket

State

CT

Zip Code

06338-3380

FEC ID number of contributing  
federal political committee.Name of Employer  
Mashantucket Pequot Tribe

Occupation

Tribal Vice Chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A65FF326C4F6145EB83C

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 66

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Roger W Sant

Mailing Address

2929 N St. NW

City

Washington

State

DC

Zip Code

20007-3342

FEC ID number of contributing  
federal political committee.

Name of Employer

N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-700.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: AF0BD4B810E214D4DA36

B.

Full Name (Last, First, Middle Initial)

Mr. Mark Scheinberg

Mailing Address

745 Burnside Ave.

City

East Hartford

State

CT

Zip Code

06108-2705

FEC ID number of contributing  
federal political committee.Name of Employer  
Goodwin College

Occupation

President

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-200.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: ACC575959ADB3447C8FB

C.

Full Name (Last, First, Middle Initial)

Ed Welden, Jr.

Mailing Address

1103 South 21st Street

City

Birmingham

State

AL

Zip Code

35205-2809

FEC ID number of contributing  
federal political committee.Name of Employer  
Southeast Property Manage-  
ment

Occupation

Owner

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Amount of Each Receipt this Period

-2300.00

Redesignation to FOCD

[MEMO ITEM]

Transaction ID: A4283A573F0034388845

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 66

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

n/a Unitemized Donors

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

150.00

Unitemized Donors

Transaction ID: U5BACAE1C16B242A5BC3

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

150.00

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 66

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Record Printing &amp; Copy Center

Mailing Address

1117 Villa Avenue

City

Sioux City

State

IA

Zip Code

51102

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2731.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

Amount of Each Receipt this Period

2731.14

Transaction ID: A03C9B1C4D62540A79C8

B.

Full Name (Last, First, Middle Initial)

Christine Damato

Mailing Address

19 Paxton Road

City

West Hartford

State

CT

Zip Code

06107-3325

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

Amount of Each Receipt this Period

300.00

Transaction ID: A3D289A71A99647759B8

C.

Full Name (Last, First, Middle Initial)

Mr. Vincent Frillici

Mailing Address

1100 H St., Ste.940 NW

City

Washington

State

DC

Zip Code

20005-5498

FEC ID number of contributing  
federal political committee.

Name of Employer

Patton Boggs LLP

Occupation

Senior Policy Advisor

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

931.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

Amount of Each Receipt this Period

800.00

Transaction ID: A31F794296AE14401913

SUBTOTAL of Receipts This Page (optional) .....

3831.14

TOTAL This Period (last page this line number only) .....

3831.14

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 66

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Morgan Stanley Smith Barney

Mailing Address

City Place 1

185 Asylum Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

-235046.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Amount of Each Receipt this Period

-120695.21

Interest

Transaction ID: A6EF9F003BD684019AA1

SUBTOTAL of Receipts This Page (optional) .....

-120695.21

TOTAL This Period (last page this line number only) .....

-120695.21



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 66

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Advantage Payroll Services	<b>Transaction ID:</b> BD86F8E1537E34DB99F3 <b>Date of Disbursement</b>
Mailing Address 126 Marrow Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div>
City Auburn State ME Zip Code 04210	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Processing Fee	<div>120.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Advantage Payroll Services	<b>Transaction ID:</b> BBA51400BB0EC4FB0BE0 <b>Date of Disbursement</b>
Mailing Address 126 Marrow Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City Auburn State ME Zip Code 04210	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Processing Fee	<div>70.34</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield	<b>Transaction ID:</b> BF8E999EAA2E84FE58A7 <b>Date of Disbursement</b>
Mailing Address 370 Bassett Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City North Haven State CT Zip Code 06473-4201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Health Insurance	<div>630.68</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**821.82**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 915 South 500 East, Ste. 200	<b>Transaction ID:</b> B9F379E7E226944C5919 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 3 / 2 0 0 8</div> </div>
City American Fork State UT Zip Code 84003-3373 Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>25.40</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 830175 Acct Analysis City Dallas State TX Zip Code 75283-0175 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> BBB151FCB1A2B4314B76 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>35.03</div>
<b>C.</b> Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> BEDE7112ECE954ABEA9F <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>35.03</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

95.46

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><input type="text"/> Category/ Type</td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Hartford	State CT	Zip Code 06106	Purpose of Disbursement Taxes	<input type="text"/> Category/ Type	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> BB6FFE95805AB47BC97E <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>129.17</div>
City Hartford	State CT	Zip Code 06106									
Purpose of Disbursement Taxes	<input type="text"/> Category/ Type										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
<b>B.</b> Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><input type="text"/> Category/ Type</td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Hartford	State CT	Zip Code 06106	Purpose of Disbursement Taxes	<input type="text"/> Category/ Type	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> B582BA5F647F74300BB7 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>178.75</div>
City Hartford	State CT	Zip Code 06106									
Purpose of Disbursement Taxes	<input type="text"/> Category/ Type										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
<b>C.</b> Full Name (Last, First, Middle Initial) IRS <hr/> Mailing Address P.O. Box 8530 <hr/> <table> <tr> <td>City Philadelphia</td> <td>State PA</td> <td>Zip Code 19162</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><input type="text"/> Category/ Type</td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Philadelphia	State PA	Zip Code 19162	Purpose of Disbursement Taxes	<input type="text"/> Category/ Type	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> B1F6C8EEEE90B4626945 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>934.26</div>
City Philadelphia	State PA	Zip Code 19162									
Purpose of Disbursement Taxes	<input type="text"/> Category/ Type										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1242.18

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City  
Philadelphia

State  
PA

Zip Code  
19162

Purpose of Disbursement  
Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B1F8943DBF7AB4102B59

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1314.68

B.

Full Name (Last, First, Middle Initial)

Morgan Stanley

Mailing Address One City Place  
ATT: Ryan Kennedy

City  
Hartford

State  
CT

Zip Code  
06103-3432

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B879FD5A6592E4CCF8C2

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

83.00

C.

Full Name (Last, First, Middle Initial)

Petty Cash

Mailing Address P.O. Box 270701

City  
West Hartford

State  
CT

Zip Code  
06127

Purpose of Disbursement  
Taxi, mileage reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B30493BC4C13C419EB53

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

350.00

SUBTOTAL of Disbursements This Page (optional) .....

1747.68

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 66

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Postmaster - West Hartford	<b>Transaction ID:</b> B0A517FE62D764063953 <b>Date of Disbursement</b>																				
Mailing Address 102 LaSalle Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	4		2	0	0	8												
City West Hartford State CT Zip Code 06107 Purpose of Disbursement Postage Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>294.00</td> </tr> </table>	294.00																			
294.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) The Des Moines Embassy Club	<b>Transaction ID:</b> BD4E3CFFCD54D4F15A86 <b>Date of Disbursement</b>																				
Mailing Address 801 Grand Avenue Suite 4000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	2		2	0	0	8												
City Des Moines State IA Zip Code 50309-2762 Purpose of Disbursement Finance Charges Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>182.55</td> </tr> </table>	182.55																			
182.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) The Liberty Hotel	<b>Transaction ID:</b> B60283CD1B4C34FF9A78 <b>Date of Disbursement</b>																				
Mailing Address 215 Charles Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	2		2	0	0	8												
City Boston State MA Zip Code 02114-3001 Purpose of Disbursement Lodging & Food & Beverage Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>407.14</td> </tr> </table>	407.14																			
407.14																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

883.69

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> B9606C13CE97E4067AF9 <b>Date of Disbursement</b>
Mailing Address 8808 Irvine Center Drive	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Irvine State CA Zip Code 92618-4201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone Candidate Name	<div>188.43</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> B4746CAE23A404429AF7 <b>Date of Disbursement</b>
Mailing Address 8808 Irvine Center Drive	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Irvine State CA Zip Code 92618-4201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone Candidate Name	<div>142.16</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> BEAE29E47255E42109A6 <b>Date of Disbursement</b>
Mailing Address 8808 Irvine Center Drive	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Irvine State CA Zip Code 92618-4201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone Candidate Name	<div>280.55</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

611.14

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 66

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Voxel.net inc	<b>Transaction ID:</b> BB34302FFF58F479E90D <b>Date of Disbursement</b>																				
Mailing Address 29 Broadway, 30th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	8												
City New York State NY Zip Code 10006-3216	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement repayment of debt	<table border="1"> <tr> <td colspan="10">2459.50</td> </tr> </table>	2459.50																			
2459.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Voxel.net inc	<b>Transaction ID:</b> B75F73B2F1B7C48B3B9E <b>Date of Disbursement</b>																				
Mailing Address 29 Broadway, 30th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	8												
City New York State NY Zip Code 10006-3216	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement repayment of debt	<table border="1"> <tr> <td colspan="10">4919.00</td> </tr> </table>	4919.00																			
4919.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kathryn Damato	<b>Transaction ID:</b> B1EAAD21C305C4B40AD1 <b>Date of Disbursement</b>																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	8												
City West Hartford State CT Zip Code 06117-2903	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1896.95</td> </tr> </table>	1896.95																			
1896.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

9275.45

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane	<b>Transaction ID:</b> B3866FFB30E8244AEB9D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City West Hartford State CT Zip Code 06117-2903 Purpose of Disbursement Reimb of trael expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>380.14</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Kathryn Damato Mailing Address 10 Blackhawk Lane City West Hartford State CT Zip Code 06117-2903 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B0046D485E1B644CC98B <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1896.96</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Emily Fetting Mailing Address 513 Independence Avenue SE City Washington State DC Zip Code 20003-1144 Purpose of Disbursement Reimbursement on cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B76C2489DA3DF429FB1D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>113.35</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

2390.45

**TOTAL** This Period (last page this line number only) .....



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Euginia Gluzberg

Mailing Address 1380 Paradise Avenue

City  
Hamden

State  
CT

Zip Code  
06514-1017

Purpose of Disbursement  
Hourly Compliance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B9A84BBE9B15B4ABA8B1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1114.76

SUBTOTAL of Disbursements This Page (optional) .....

1114.76

TOTAL This Period (last page this line number only) .....

18182.63

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Friends of Chris Dodd

Mailing Address PO BOX 270701

City

West Hartford

State

CT

Zip Code

06127

Purpose of Disbursement

Transfer

Candidate Name

Friends of Chris Dodd

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: B60D0AFA006614734A17

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

351210.00

B.

Full Name (Last, First, Middle Initial)

Friends of Chris Dodd

Mailing Address PO BOX 270701

City

West Hartford

State

CT

Zip Code

06127

Purpose of Disbursement

Transfer

Candidate Name

Friends of Chris Dodd

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: BC2F45B62A0DE4E16861

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

88900.00

SUBTOTAL of Disbursements This Page (optional) .....

440110.00

TOTAL This Period (last page this line number only) .....

440110.00

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Countrywide PAC

Mailing Address 1717 Pennsylvania Avenue NW  
Suite 625

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Refund

Candidate Name  
Countrywide PAC

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B8B72B7D1E7194A8C98B

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

5000.00

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 28 / 66

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

958.74

Transaction ID: D06FE0A4EF1384B299BD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

958.74

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

335.50

Transaction ID: D079F7773ED3A429F995

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

335.50

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

320.68

Transaction ID: DAB48C0D1D9BF48E2819

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.68

1) **SUBTOTALS** This Period This Page (optional).....

1614.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 29 / 66

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

1646.22

Transaction ID: D684E05F5028F4B9FA8C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1646.22

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

647.11

Transaction ID: DC05308729895455AAF0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

647.11

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

896.07

Transaction ID: D03866EA927C6487BAA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.07

1) **SUBTOTALS** This Period This Page (optional).....

3189.40

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

694.96

Transaction ID: D7AA2635D35294D99959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

694.96

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
REMAX Results Realty

Nature of Debt (Purpose):  
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code  
Mason City IA 50401

Outstanding Balance Beginning This Period

1036.46

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone
Mailing Address Business Services  
PO Box 91154
City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

669.82

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

1) **SUBTOTALS** This Period This Page (optional).....

2401.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

657.85

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

471.50

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

58.58

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

1) **SUBTOTALS** This Period This Page (optional).....

1187.93

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

418.15

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

575.42

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

431.46

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

1) **SUBTOTALS** This Period This Page (optional).....

1425.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 / 66

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

106.73

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

622.51

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New Hampshire

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

376.44

Transaction ID: DD1D454DB157C4318B67

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

376.44

1) **SUBTOTALS** This Period This Page (optional).....

1105.68

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 / 66

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

246.08

Transaction ID: DE82D6F912C4D47CB9A5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

246.08

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

993.78

Transaction ID: D5B30D2CCB1A941208DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

993.78

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

131.82

Transaction ID: D5B0C3B4DA75E4096B6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

131.82

1) **SUBTOTALS** This Period This Page (optional).....

1371.68

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 / 66

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Air Charter Team, Inc.

Nature of Debt (Purpose):  
Transportation

Mailing Address 10015 N.W. Ambassador Drive  
Suite 202

City State ZIP Code  
Kansas City MO 64153

Outstanding Balance Beginning This Period

1304.61

Transaction ID: DCAA2DBC5CEA94CD089C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1304.61

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Printer Works

Nature of Debt (Purpose):  
Printer

Mailing Address 3481 Arden Road

City State ZIP Code  
Hayward CA 94545

Outstanding Balance Beginning This Period

819.44

Transaction ID: DFC2998A4374B4E86BCA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

819.44

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hinckley Springs

Nature of Debt (Purpose):  
Water Cooler Services

Mailing Address P.O. Box 660579

City State ZIP Code  
Dallas TX 75266-0579

Outstanding Balance Beginning This Period

306.68

Transaction ID: DE674F26EC06645DDB95

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

306.68

1) **SUBTOTALS** This Period This Page (optional).....

2430.73

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 36 / 66

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Deaf Services UnlimitedNature of Debt (Purpose):  
Interpreting Service

Mailing Address Suite 170

City State ZIP Code  
Des Moines IA 50309

Outstanding Balance Beginning This Period

130.00

Transaction ID: DF8A44964B3424CC3B77

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Des Moines Theatrical ShopNature of Debt (Purpose):  
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code  
West Des Moines IA 50265

Outstanding Balance Beginning This Period

106.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSNature of Debt (Purpose):  
Shippng

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadephia PA 19170

Outstanding Balance Beginning This Period

126.91

Transaction ID: D46BD2137637F4679A43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.91

**1) SUBTOTALS** This Period This Page (optional).....

362.91

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 37 / 66

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Simard Printing

Nature of Debt (Purpose):  
Printing Services

Mailing Address 300 Salem Street

City State ZIP Code  
Woburn MA 01801-2055

Outstanding Balance Beginning This Period

433.13

Transaction ID: DAEB900B19D5343069F1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

433.13

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cox Communications

Nature of Debt (Purpose):  
Internet Services

Mailing Address PO Box 6059

City State ZIP Code  
Cypress CA 90630

Outstanding Balance Beginning This Period

138.02

Transaction ID: DEAECEB41D358C496EAE8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

416.01

Transaction ID: D91E4CB1724CB455C94A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

416.01

1) **SUBTOTALS** This Period This Page (optional).....

987.16

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1115.75

Transaction ID: DEC21CC9229D5404F97B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1115.75

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

659.58

Transaction ID: DFC448EB6B1054323A65

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

659.58

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

72.04

Transaction ID: D275E706E6F7F4C6C938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72.04

1) **SUBTOTALS** This Period This Page (optional).....

1847.37

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

123.36

Transaction ID: DF30D747F375F47E5882

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

196.90

Transaction ID: DAB442CA849544E83A13

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

196.90

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1406.57

Transaction ID: DB92957A464EF4AC685D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1406.57

1) **SUBTOTALS** This Period This Page (optional).....

1726.83

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
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☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

65.24

Transaction ID: D7B3E6DAFE5CE4AFB9B8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verham News

Nature of Debt (Purpose):  
Rent

Mailing Address P.O. Box 706

City State ZIP Code  
White Riv Jct VT 05001-0706

Outstanding Balance Beginning This Period

910.28

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bi-State Cartridge Service, Inc.

Nature of Debt (Purpose):  
Office Supplies

Mailing Address 1325 15th Street

City State ZIP Code  
Moline IL 61265

Outstanding Balance Beginning This Period

130.54

Transaction ID: D163D453900874450889

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.54

1) **SUBTOTALS** This Period This Page (optional).....

1106.06

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
U.S. Express Inc.Nature of Debt (Purpose):  
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code  
Landover MD 20785

Outstanding Balance Beginning This Period

160.24

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Old Town Family RestaurantNature of Debt (Purpose):  
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code  
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

130.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COVADNature of Debt (Purpose):  
Internet ServicesMailing Address Dept. 33408  
PO BOX 39000City State ZIP Code  
San Francisco CA 94139

Outstanding Balance Beginning This Period

1535.76

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

1) **SUBTOTALS** This Period This Page (optional).....

1826.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COVAD

Nature of Debt (Purpose):  
Internet Services

Mailing Address Dept. 33408  
PO BOX 39000

City State ZIP Code  
San Francisco CA 94139

Outstanding Balance Beginning This Period

1056.76

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Home Front Communications

Nature of Debt (Purpose):  
Video

Mailing Address 1121 14th Street NW

City State ZIP Code  
Washington DC 20005-5641

Outstanding Balance Beginning This Period

6000.00

Transaction ID: D9C275736AC4E46B69DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jocelyn Augustino Photogrpaher

Nature of Debt (Purpose):  
Photographer

Mailing Address 3416 Gunston Road

City State ZIP Code  
Alexandria VA 22302-2134

Outstanding Balance Beginning This Period

69.00

Transaction ID: D0781506CE4AC48A0805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.00

1) **SUBTOTALS** This Period This Page (optional).....

7125.76

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Des Moines Water WorksNature of Debt (Purpose):  
Utilities

Mailing Address 2201 George Flagg Parkway

City State ZIP Code  
Des Moines IA 50321-1190

Outstanding Balance Beginning This Period

117.91

Transaction ID: D1475748209CF4A0092F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.91

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660720

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

22.28

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jim VanDusseldorpNature of Debt (Purpose):  
Bus Servicing

Mailing Address 2406 15th Ave. N.

City State ZIP Code  
Clear Lake IA 50428-2037

Outstanding Balance Beginning This Period

92.50

Transaction ID: DECE5259C4BB240ADBB7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.50

**1) SUBTOTALS** This Period This Page (optional).....

232.69

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
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☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VFW Post 775

Nature of Debt (Purpose):  
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code  
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

150.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

304.30

Transaction ID: DD45DB76A7149485EADE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

304.30

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

1861.62

Transaction ID: DFE38B3A3574543178FC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1861.62

1) **SUBTOTALS** This Period This Page (optional).....

2315.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Kilkenney'sNature of Debt (Purpose):  
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code  
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

220.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch BrothersNature of Debt (Purpose):  
CopierMailing Address 325 Grand Avenue  
P.O. Box 1755City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

126.82

Transaction ID: DFAE4308D10124EEDAE3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.82

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch BrothersNature of Debt (Purpose):  
CopierMailing Address 325 Grand Avenue  
P.O. Box 1755City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

211.99

Transaction ID: D3C51D93654FD40B59BB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.99

**1) SUBTOTALS** This Period This Page (optional).....

558.81

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ComcastNature of Debt (Purpose):  
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code  
Newark NJ 07101

Outstanding Balance Beginning This Period

351.30

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

239.04

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

1481.16

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

**1) SUBTOTALS** This Period This Page (optional).....

2071.50

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
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☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MoreSound Company

Nature of Debt (Purpose):  
Sound Equipment

Mailing Address 102 North Street

City State ZIP Code  
Jaffrey NH 03452-5301

Outstanding Balance Beginning This Period

400.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Comcast

Nature of Debt (Purpose):  
Cable Service

Mailing Address P.O. Box 3005

City State ZIP Code  
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

197.56

Transaction ID: D1327435AF7974016BBD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ExxonMobil

Nature of Debt (Purpose):  
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code  
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

241.86

Transaction ID: D303F42DD72104352BB3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

241.86

1) **SUBTOTALS** This Period This Page (optional).....

839.42

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ExxonMobilNature of Debt (Purpose):  
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code  
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

429.36

Transaction ID: D2591D51138CC454BA3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.36

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Geoff LuxenbergNature of Debt (Purpose):  
Reimbursement for gas &  
signatures

Mailing Address 249A New State Road

City State ZIP Code  
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

107.00

Transaction ID: D8E19BDBD0BE84CDFB6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NexGenNature of Debt (Purpose):  
Utilities

Mailing Address 10500 Hickman Road Ste J

City State ZIP Code  
Clive IA 50325-3706

Outstanding Balance Beginning This Period

224.86

Transaction ID: D2FBA9339003447ADB22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

224.86

1) **SUBTOTALS** This Period This Page (optional).....

761.22

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WHO Newsradio 1040Nature of Debt (Purpose):  
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code  
Des Moines IA 50312

Outstanding Balance Beginning This Period

400.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

540.80

Transaction ID: D4DB84BA83BD34248B12

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

540.80

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

852.59

Transaction ID: D21C371285AF1401F9CB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

852.59

**1) SUBTOTALS** This Period This Page (optional).....

1793.39

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

254.12

Transaction ID: D637921B16CAA45B19B6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

254.12

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

50.75

Transaction ID: DF36117C0589D4D9C911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.75

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

401.72

Transaction ID: D5B3618F71E3745EC9DD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.72

**1) SUBTOTALS** This Period This Page (optional).....

706.59

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

239.60

Transaction ID: DE6029EBE091B415FB6D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.60

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

263.55

Transaction ID: DBA39930B48064589AB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

263.55

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Free Media, Inc.

Nature of Debt (Purpose):  
Reimbursement for Travel  
Expenses
Mailing Address 777 West End Avenue  
#5C
City State ZIP Code  
New York NY 10025

Outstanding Balance Beginning This Period

635.01

Transaction ID: DF03B1B1603F54C5183C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

635.01

1) **SUBTOTALS** This Period This Page (optional).....

1138.16

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Free Media, Inc.Nature of Debt (Purpose):  
Reimbursement for Phone  
ExpensesMailing Address 777 West End Avenue  
#5CCity State ZIP Code  
New York NY 10025

Outstanding Balance Beginning This Period

150.09

Transaction ID: D142C4EE26CC3459DA22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.09

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The TelegraphNature of Debt (Purpose):  
Subscription

Mailing Address PO Box 1008

City State ZIP Code  
Nashua NH 03061

Outstanding Balance Beginning This Period

20.81

Transaction ID: D1D76CBB4EBC7498F81D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.81

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Interstate Power and Light Co.Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 5007

City State ZIP Code  
Dubuque IA 52004-5007

Outstanding Balance Beginning This Period

250.36

Transaction ID: DF8C3EA191F814F5C94C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.36

1) **SUBTOTALS** This Period This Page (optional).....

421.26

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cedar Rapids Municipal Utilities

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3255

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

165.81

Transaction ID: D9457B91CEE0540E8A08

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

165.81

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Newman and Leventhal Caterers, Inc.

Nature of Debt (Purpose):  
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code  
New York NY 10024-6025

Outstanding Balance Beginning This Period

2136.07

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Embarq

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660068

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

1064.16

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

1) **SUBTOTALS** This Period This Page (optional).....

3366.04

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
EmbarqNature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660068

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

378.82

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

153.03

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.03

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

364.55

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

364.55

**1) SUBTOTALS** This Period This Page (optional).....

896.40

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

561.93

Transaction ID: DA1C685B9BFAF4CD7A76

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

660.55

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

660.55

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Washington Promotions & PrintingNature of Debt (Purpose):  
PrintingMailing Address 5125 MacArthur Blvd. NW  
Suite 14City State ZIP Code  
Washington DC 20016

Outstanding Balance Beginning This Period

5547.90

Transaction ID: DE815690D20EF4A6EB02

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5547.90

**1) SUBTOTALS** This Period This Page (optional).....

6770.38

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Big Ten Rentals, Inc.

Nature of Debt (Purpose):  
Bases

Mailing Address 1820 Boyrum St

City State ZIP Code  
Iowa City IA 52240-4555

Outstanding Balance Beginning This Period

34.82

Transaction ID: D9CE80039AE0F470B870

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

34.82

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Frontline Productions

Nature of Debt (Purpose):  
Lighting & Video

Mailing Address 125 Hemlock Drive

City State ZIP Code  
Deep River CT 06417

Outstanding Balance Beginning This Period

885.00

Transaction ID: DF269F8B8076845BAB94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

885.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mason City Public Utilities

Nature of Debt (Purpose):  
Utilities

Mailing Address 10 First Street Northwest

City State ZIP Code  
Mason City IA 50401-3224

Outstanding Balance Beginning This Period

123.36

Transaction ID: DDE7D15C566704EE4997

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

1) **SUBTOTALS** This Period This Page (optional).....

1043.18

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Waste Management

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 756

City State ZIP Code  
Des Moines IA 50303

Outstanding Balance Beginning This Period

266.02

Transaction ID: D13EE948ED74B4BE0B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

266.02

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Storefront Political Media

Nature of Debt (Purpose):  
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code  
San Francisco CA 94108

Outstanding Balance Beginning This Period

537.08

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mediacom

Nature of Debt (Purpose):  
Cable

Mailing Address P.O. Box 5744

City State ZIP Code  
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

19.14

Transaction ID: DBAEE80A9C8F14CBF964

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.14

1) **SUBTOTALS** This Period This Page (optional).....

822.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mediacom

Nature of Debt (Purpose):  
Cable

Mailing Address P.O. Box 5744

City State ZIP Code  
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

92.37

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.37

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Heartland Flagpoles and Flags

Nature of Debt (Purpose):  
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code  
Des Moines IA 50315

Outstanding Balance Beginning This Period

436.60

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPS

Nature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

434.09

Transaction ID: D93A99FFBC04A4242996

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

434.09

1) **SUBTOTALS** This Period This Page (optional).....

963.06

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

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☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPS

Nature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

60.76

Transaction ID: D6EB2D896D8C64BA8AA9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.76

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPS

Nature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

427.18

Transaction ID: DC7364FE5C9E54CCCA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

427.18

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Unitil

Nature of Debt (Purpose):  
Utilities

Mailing Address PO BOX 2013

City State ZIP Code  
Concord NH 03302

Outstanding Balance Beginning This Period

115.06

Transaction ID: D14B3EB6706674783815

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

115.06

1) **SUBTOTALS** This Period This Page (optional).....

603.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Northern Business Machines

Nature of Debt (Purpose):  
Rental

Mailing Address 24 Terry Avenue

City State ZIP Code  
Burlington MA 01803

Outstanding Balance Beginning This Period

698.00

Transaction ID: DF72BE3ADBBB14CB9BC7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

698.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Grand Colony

Nature of Debt (Purpose):  
Lodging

Mailing Address 2824 Grand Avenue, #218

City State ZIP Code  
Des Moines IA 50312

Outstanding Balance Beginning This Period

153.50

Transaction ID: D232577C9B94046BB9A9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.50

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

111.80

Transaction ID: D51DCEF2884624EE6A6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

111.80

1) **SUBTOTALS** This Period This Page (optional).....

963.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PMI

Nature of Debt (Purpose):  
Parking

Mailing Address Parking Management, Inc.  
1725 DeSales Street NW

City State ZIP Code  
Washington DC 20036-4406

Outstanding Balance Beginning This Period

465.00

Transaction ID: D8747457AA9894F1CB0C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

465.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPS

Nature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

59.43

Transaction ID: DBA9563936FE04325AD0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59.43

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Northland Trumbull, LLC

Nature of Debt (Purpose):  
Rent

Mailing Address C/o Northland Investment Corporati  
P.O. Box 845604

City State ZIP Code  
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: D27B30042D3C24348857

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

1) **SUBTOTALS** This Period This Page (optional).....

4374.43

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
IAFF FIREPAC

Nature of Debt (Purpose):  
Rental & Bus Wrap

Mailing Address Attn: David B. Billy  
1750 New York Ave, NW

City State ZIP Code  
Washington DC 20006-5305

Outstanding Balance Beginning This Period

32233.24

Transaction ID: DE8437A16695047AC84E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32233.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Kirkwood

Nature of Debt (Purpose):  
Rent

Mailing Address 400 Walnut Street

City State ZIP Code  
Des Moines IA 50309

Outstanding Balance Beginning This Period

757.17

Transaction ID: DF06ED48AFB25453C90A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

757.17

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPS

Nature of Debt (Purpose):  
Courier Service

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

86.50

Transaction ID: D42C8F3A7325E4A5A80E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

86.50

1) **SUBTOTALS** This Period This Page (optional).....

33076.91

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 63 / 66

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cedar Rapids Municipal UtilitiesNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3255

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

57.90

Transaction ID: D0E366AACBEEB484CB02

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.90

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal ServicesMailing Address Centralized Accounting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

10000.00

Transaction ID: D76E8E67033CC4385B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Northland Trumbull, LLCNature of Debt (Purpose):  
RentMailing Address C/o Northland Investment Corporati  
P.O. Box 845604City State ZIP Code  
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: D62DA2D977A734EC594A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

**1) SUBTOTALS** This Period This Page (optional).....

13907.90

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

312.07

Transaction ID: DD365AF099EC8458EBE5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

312.07

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Northland Trumbull, LLC

Nature of Debt (Purpose):  
Rent

Mailing Address C/o Northland Investment Corporati  
P.O. Box 845604

City State ZIP Code  
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: DA4696BC628A349F7971

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Voxel.net inc

Nature of Debt (Purpose):  
Web Hosting

Mailing Address 29 Broadway, 30th Floor

City State ZIP Code  
New York NY 10006-3216

Outstanding Balance Beginning This Period

2459.50

Transaction ID: DC06AE5CA3EED49569AE

Amount Incurred This Period

0.00

Payment This Period

2459.50

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

4162.07

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wired for Change, Inc.Nature of Debt (Purpose):  
Internet ServicesMailing Address 1700 Connecticut Ave., NW  
Suite 403City State ZIP Code  
Washington DC 20009

Outstanding Balance Beginning This Period

4000.00

Transaction ID: DA09D2641F3154B62833

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Voxel.net incNature of Debt (Purpose):  
Web Hosting

Mailing Address 29 Broadway, 30th Floor

City State ZIP Code  
New York NY 10006-3216

Outstanding Balance Beginning This Period

4919.00

Transaction ID: DF06FD864428E4C118ED

Amount Incurred This Period

0.00

Payment This Period

4919.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
USRental.comNature of Debt (Purpose):  
Payment for computers

Mailing Address 970 Summer Street

City State ZIP Code  
Stamford CT 06905-5542

Outstanding Balance Beginning This Period

4658.70

Transaction ID: D1F57A4B00A37493E946

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4658.70

**1) SUBTOTALS** This Period This Page (optional).....

8658.70

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal ServicesMailing Address Centralized Accouting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

10017.02

Transaction ID: D137E7211B1E44139A9C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10017.02

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal Consulting ServicesMailing Address Centralized Accouting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

0.00

Transaction ID: D009B107509464ACF93C

Amount Incurred This Period

12218.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

12218.23

1) **SUBTOTALS** This Period This Page (optional).....

22235.25

2) **TOTALS** This Period (last page this line number only).....

142390.52

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

142390.52